Mil. CHAIRMAN: I think we bad enough of it. *(Interruptions)* .Please sit down ... *(Interruptions)...*

The Minister has answered it. I am not accepting that question, please. The answer has 'been given. We cannot go on like this.

SHRI S.K.T. RAMACHANDRAN: From the answer of the non. Minister 1 feel that another Bhavan, that is, Agni Bhavan, is necessary in the metropolitan city to fight fire. Fire accidents have become very common nowadays in metropolitan cities. At the same time, we cannot block development. We are going in for skyscrapers. We are going in for very tall, highrise buildings. I do not know whether there is in any part of the world a research and development centre for fire-proof building. If it is there, we can also follow that. My question is related to modernisation. We are going in for sophisticated buildings. Have we modernised our fire-combating services adequately to fight such fire accidents?

SHRI RAJESH PILOT; Mr Chair man, Sir, as far as tne question about an R&D centre is concerned, we also have those facilities. Technical advice is given on this. But, as I said, it has to be done on both sides. One, the public culture has to be changed. We have to educate our people. We have tried out best. If you go to any "building, you find some sort of advice or some guidelines on every building, but unfortunately s they are not being followed. That is one of the factors.

The second factor is about modernisation. The hon. Member has talked about it. It is kept in mind. Our future buildings are coming up with that. We are keeping the modernisation aspect in mind. We also use those srrvices given by the research and development department. We keep it in mind

SHRI S. K. T. RAMACHANDRAN: My question is related to fire-fighting services.

SHRI RAJESH PILOT: Fire-fighting services. Yes, Sir, they have been modernised. As I said, it is an ongoing process. We have the technical facilities available. Research ad. vice is 'her.-;. It nas been modernised. You see ten years back what fire services we had and what we have today. I am sure our fire services are uptodate and are modern, whether for airport or domestic requirement. We have modern facilities.

Medical/Dental Colleges in the Country

*223. SHRI ANANT RAM JAISWAL; Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state;

(a) what is the number of medical and dental colleges as on 1st January 1993 and what is the growth rate of such colleges in the last five years, State and Union Territory-wise;

(b) whether any ideal ratio of doctors vis-a-vis nurses adn laboratory technicians had been determined; if so, the de'ails and whether the same is maintained in all States and Union territories;

(c) what is the number of medical graduate nurses and laboratory technicians passrd out in the last five years State and Union Territory-wise; and

(d) whether any systematic and planned policy for Medical education ia under Government's consideration; if so. the details thereof?

THE DEPUTY MINISTER IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI PABAN SINGH GHATOWAR): (a) to (d) A statement is laid on the Table of the House.

Statement

(a) Thare are L4ti medical and 117 dental colleges. From 1988 to 1993, 17 medical colle ;es were added in the States and college in a Union Territory. In respect of Dental Col leges, 9 were ado 'd in the States and 1 in a Union Territory.

(b) No, Sir.

(c) According to available infor mation:

—From 1986 t_0 1990, 46989 medical graduates pa sed out from the States and 183 I from the Union Territories.

—From 1986 fa 1990, 41721 nurses passed out. Trie break-up is available Broard-/ise and not State/ Union Terrrito y-wise.

—The admission capacity for Laboratory Tec micians. diploma/ certificate cour ;es is 22193 each year; figures on $lhos_e$ passing out are not available.

(d) Yes, Sir. The medical education policy is intended interalia to cover various aspects of health manpower develo ament, improve the quality of medii al education and other related maiters.

श्री अनन्त राम जायसवाल : मान्यवर, सभापति जी, सरकार ने नारा दिया है—"स्वास्थ्य सब के लिये" तो मैं सरकार से जानना चाहता हूं कि इस नारे को अमली जामा कब तक पहना दिया जायेगा ? बी पार्ट, इसको अमली जामा पहनाने के लिये कितने अस्पताल, डाक्टर्स, नर्सेज और लैब टैक्नीशियन्स की जरूरत पड़ेगी और इन डाक्टर्स में, नर्सेज में और लैब टैक्नीशियंस में क्या कोई रेशो रखा गया है या नहीं रखा गया है ?

SHRI PABAN SINGH GHATOWAR; Sir, in th i main answer we have given tie information that there are 146 m 'dical colleges and, 117 dental college

श्री अनन्त राम जायसवाल : यह तो पढ़ लिया गया है, सप्लीमेंटरी जो किया गया है, उसका जवाब दीजिये

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SHRI PABAN SINGH GHATOWAR; Sir, we have given the figures about doctors as well as about nurses. There is no ratio between doctors and nurses. The Bhore Committee $_0$f 1946 had given the ratio of one doctor to three nurses. Another Committee appointed to go into the ratio norms has not given any such recommendation as to how many nurses should be there to one doctor.

THE MINISTER OF HEALTH AND

श्री अनन्त राम जायसवाल : जो पहला सप्लीमेंटरी है, उसका जवाब नहीं आया (**व्यवधान**) . . .

MR. CHAIRMAN: He has talked about the ratio.

श्री अनन्त राम जायसवाल : मैंने यह पूछा था कि सरकार का नारा है "सब को स्वास्थ्य" तो इस नारे को कब तक अमली जामा पहनाया जाएगा, कब पूरा किया जाएगा ? दूसरा मैंने यह पूछा था कि इसके लिये कितने डाक्टर्ज, कितनें नर्सेज और कितने लैब-टैक्नीशियंस की जरूरत पड़ेगी और इस वक्त कितने मौजूद हैं या उनकी कमी है, तो उस कमी को कब तक पूरा किया जायेगा ? यह मैंने पूछा था।

FAMILY WELFARE (SHRI B. SHANKAR ANAND): Sir, India is *a.* signatory to the Alma Ata Declaration and the goal of 'health for all is to be achieved by the year 2000. The hon. Member has asked about the various personnel required to achieve 'the health for all* goal. In the main answer we have given the number of doctors and others that are available. He is mainly concerned about the laboratory technicians. I will give details baout the Laboratory Technicias to the hon. Members.

AN HON. MEMBER: You can send it.

SHRI B. SHANKARANAND: I will send bam th$_e$ details. There are not only technicians, but many other technical personnel that are required to work as a team with doctors and nurseg for providing medical care to the people besides health facilities.

श्री अनन्त राम जायसवाल : माननीय मंत्री जी क्या यह बतायेंगे कि वह पांच राज्य कौन कौन से हैं जिनमें सबसे ज्यादा मेडिकल कालेज हैं और वह पांच राज्य कौन कौन से हैं जिनमें सबसे कम मेडिकल कालेज हैं। यह जो असंतुलन है इसका क्या कारण है ? सरकार इस असंतुलन को दूर करने का क्या कोई उपाय करेगी ?

SHRI B. SHANK ARAN AND; Sir, I can give the names of th$_e$ States having medical colleges; Andhra Pradesh has got 10 medical colleges; Bihar has got 10 medical colleges; Karnataka has got 18 medical colleges, Maharashtra has got 31 medical colleges and Tamil Nadu has got 14 medical colleges.

i . SHRI PRAKASH YASHWANT AMBEDKAR; Are these private or Government.

SHRI B. SHANKARANAND; I can give that also. But, Sir, I do not have the details about how many are private and how many are Government . I will pass on this information if one is interested.

श्री अनन्त राम जायसवाल : मान्यवर, मैंने यह पूछा था कि वह पांच राज्य कौन हैं जिनमें सबसे ज्यादा मेडिकल कालेज हैं और वह पांच राज्य कौन हैं जिनमें सबसे कम हैं और इस असंतुलन के कारण क्या हैं और सरकार इस असंतुलन को कैसे दुर करेगी ?

MR. CHAIRMAN: You gave the total number.

SHRI B. SHANKARANAND: I will give you. Goa has got only one medical college. Haryana has got only one medical college. Himachal Pradesh has got only one medical college. Manipur has got only one medical college. Of course, Assam and North-Eastern States do not have medical colleges. This is the state of affairs. The reason for this is it depends upon the State's encouragement to provide medical facilities both in the private sector and in the public sector. There are some States who have very liberally helped the private sector to open medical colleges. They themselves have opened many Government medical colleges. So: it detrnds upon the attitude of the State Government to have medical colleges.

SHRI VITHALRAO MADHAVRAO JADHAV: Mr. Chairman, Sir, the (d) part of the question says, "whether any systematic and planned policy for medical education is under Government consideration;. ."In India there are 14 medical colleges and 50 engineering colleges. In Maharashtra alone there are 15 medical colleges and 50 engineering colleges, in the private sector. In the entire country there are 60 mdical colleges and more than 100 engineering colleges in the private sector.

In view of the recent Supreme Court judgement in Mohni Jain *Versus* a private medical college, 50 per cent students have to be admitted on the basis of the fee fixed by the Government, 50 per cent students have to be admitted on cost basis and the rest of the 50 per cent students cost of their fees have to be recovered from the latter 50 per cent students.

In Maharashtra State, Government medical colleges charge just Rs. 3000 per student. The Government spends

Rs. 2 lakhs on r edical education on each student eve y year. If we go by the Supreme Court's judgement, they have to change from the rest of the 50 per cent s udents, Ks. 4 lakhs per student. Tha means for a 4-l(2 year's course, one has to spend Rs. 18 lakhs as per the judgement of the Supreme Court. ' 'ho Supreme Jourt had directed the State Governments to formulate fees according to their judgement. In v ew of this judgement, all these m :d:cal colleges and engineering colles es in the private sector are going t< be closed because nobody can afford to pay the fee of Rs. 18 lakh for 4 12 years' course.

MR. CHAIRMAN Now please ask your question. Pit ise pose your ques-tion.

SHRI VITHALRAO MADHAVRAO JADHAV: I am coning to that. May I know from the Minister whether the Government is bringing forward any Bill to save tie private medical and engineering co leges? There are more than 50 med cal collegrs in the private sector. Mo e than 2000 doctors are coming oi t of these private medical colleges.

MR. CHAIRMAN Are you giving information to the Government or do you want to a: *k* a question?... (Interruptions) ,. .1 lease ask your question.

SHRI RAJNI RA MJAN SAHU: He is having a medicf' college... *(Interruptions)* ...

SHRI VITHALRAO MADHAVRAO JADHAV: I know 'nly details about the medical and en peering colleges in the private sect< r. I do not own any medical college I want to know from the Minister whether the Government has formulated any Bill to protect these colleges so that they can survive- So what is the Government going to do so that these colleges are not closed? ..(Interruptions)

About 25,000 technical people will suffer. You do not understand about it.

MR. CHAIRMAN: You please sit down. You cannot... *(Interruptions)* . .Please sit down.

SHRI B, SHANKARANAND: Sir, it is really a serious matter... (Interruptions) ... You just lcsten to roe and then you will form your option. I want to do a little correction about the judgement which the hon. Mem. ber has referred to. The recent judgement is not in Mohini Jain's case. The judgement in Mohini Jain's case was delivered in July, 1992. Thereafter another judgement was delivered by the Supreme Court on the 4th February; 1993. Here the Supreme Court has decided and I can briefly summarise this. The Supreme Court has evolved a scheme to regulate admissions and charging of fees in professional colleges, including medical colleges and dental colleges. The judgement says:

"Only a society, registered under the Societies Registration Act, 1960 or a public trust, religious or charitable, registered under the Trusts Act etc. shall be permitted to establish a professional college. That means 'he individuals are not allowed or private companies cannot open a medical college. No individual fivm, company or other body of individual., will be permitted to esta-lish an'! administer a professional college. At feast; 50 per cent of the seats in every professional college shall be filled by the nominees of the Government or university, selected on the basis 0f merit through a common entrance examination. These will be called free seats. The remaining 50 per cent seats called payment seati, shall be filled by those candidates who are prepared to pay the prescribed fee. These candidates als0 will be selected

[Shri B. Shankaranand]

through the common entrance exa. mination. There shall be no quota reserved for the management or any family, caste or community which may have established such a college. Every State Government shall constitute a Committee to A[x] the ceiling on fees chargeable by a professional college, as the case may be, in respect of payment seats because there are two categories—free seats and payment seats—the Committee shall consist of the Vice-Chancellor, the Secretary for Education or the Joint Secretary concerned and the Director of Medical Education and Technical Education. At a later stage—this is for this year—this Committee is going to do their job only for this year—the University Grants Commission, the AH India Council of Technical Education and the Medical Council of India, may fix the tuition fee, to be charged by a private professional college in respect of payment: seats which will have the overriding effect over the. fees fixed by the previous Committee." The Supreme Cuurt have also neU that eery child has a iiaht to free education until he complrtes 14 years of age... (Interruptions)

I have not completed. *(Interruptions)*

SHRI KAMAL MORARKA: Sir, why are you victimising us with this discourse—the Supreme Court judgment? We all know the Supreme Court judgment. *(Interruptions)*

MR. CHAIRMAN: Mr. Jadhav, will you please sit down? The Minister can answer. Mr. Minister, please conclude.

SHRI B. SHANKARANAND: Sir, I have chosen to reply by your direction. It is for those Members who do not know things and who want to know them. If some Members already knew it, they may not listen. *(Interruptions)* It is not for those Members who do not want to listen.

SHRI S. JAIPAL REDDY: Mr. Chairman, Sir, the question does not strictly arise from the main question and the reply to the non-relevant sup. plementary is so legnthy that the spirit of the quesion will be killed.

SHRI B. SHANKARANAND; Sir, I wish to inform the House that this judgment does not speak of the reservation for the Scheduled Castes and the Scheduled Tribes and that has been the main question. That is all.

SHRI V. GOPALSAMY: I am lucky today. Mr. Chairman, Sir, the answer given by the hon. Minister to part (b) of the question says; no. 8 vould lika to know from the hon. Minister whether the Gvernment will come out to formulate or to determine the ideal ratio of doctors vis-a-vis nurses and laboratory technicians. The hon. Minister referred to the Supreme Court judgment. Sir, we all know thet some of the State Governments permitted private medical col-Uges and self-financing institutions to loot the people in the natr.e of ..citation fee. Of course, th* Supreme Court has given the judgment abolishing capitation fee. But the doors have not been closed. Black money will play its role Thr will collect the fee, the same capitation fee. in some form or the other. Therefore. I would like to know what steps the Government is going to take. Will the Government make an announcement that, hereafter there will not be any recognition of such medical colleges? Also, I would like to know whether the Government will formulate a Medical Education Policy in view of the Supreme Court judgement.

SHRI B. SHANKARANAND: It would be the policy of the Government to stop commerialisation of medical educaiion. Even at, the outset, it has been said that we are opposed to commercialisation of medical education in this country apart from commercialisation of education in grneral

SHRI N. E. BA: -ARAM: He is asking about implem ntation of the policy. The policy i there.

SHRI B. SHA'TCARANAND: I have not completed my answer.

SHRI KAMAL IIORARKA: He will come to the answ r.

SHRI B. SHANKARANAND: Now, the Government has to follow the scheme which has been chalked out by the Supreme Court as for the regulation of tht charging of fees. Now n_0 medical c illege in this country will allow cap itation fee in view of the judgement of the Supreme Court. The State Governments, the Governments cono rned, shall have a committee. They will admit students strictly on merit, according to 'lie judgement.

SHRI MURASOLI MARAN: But they can collect tl e money in black. His question is, ho v are you going to prevent it?

SHRI B. f.HANKARANAND: Who will collect tt e money in black?

SHRI MURASOLI MARAN: Private medical cclieges. They will collect money.

SHRI V. GOPALSAMY; We cannot shut our eyes to tile reality. A medical seat is sold at Rs. 6 lakhs or Rs. 10 lakns or Rs. If lakhs. Everybody knows about it. ""/e cannot shut our eyes to the reality. What steps is the Central Governme it going t_0 take in this regard?

MR. CHAIRMA f. Mr. Gopalsamy, how to prevent 1 lack money is an old question. We have another important question.

SHRI B. SHANKAR ANAND: In view of the judgement of the Supreme Court, the management of any private college cannot charge capitation fee or collect black money. The admission is • egulated strictly on the basis of compe Itive examinations. A select list will be prepared by the Government concerned and select students will be sent to the respective medical ^institutions. • *Interruptions).* There is absolutely no scopa for them to take any black money.

SHRI V. GOPALSAMY: Sir, I need your ptotection. *(Interruptions).* He has not repiled to my question whether the Government will formulate a Medical Education Policy in view of the judgement of the Supreme Cout. That is my question.

SHRI B. SHANK ARAN AND: I have answered it. The answer to the main question is the same... (Interruptions)

MR. CHAIRMAN: He has answer ed it. *(Interruptions)* . I call Question No. 224. Mr. O. Rajagopal.

Lack of Short Distance Train Facilities in Kerala

*224. SHRI O. RAJAGOPAL: Will the Minister of RAILWAYS be pleased to state:

(a) whehter it is a fact that short distance travelling passengers in Kerala find it. extremly difficult to commute due to lack of train facilities in the State;

(b) if so, whether it is a fact that short distance travelling public in Kerala, travel daily in sleeper coaches attached to lon.3 distance trains, without causing any inconvenience to the long distance travelling passengers; and

(c) whether it is a fact that the Railway authorities have now discided not to permit the short distance travelling passengers t_0 travel in long distance sleeper coaches; if so, what are the reasons therefor; and what steps Government propose to take to mitigate the hardships of the short distance daily cummnuters in the State?